

Supplemental Application Data Sheet

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD FOR OBTAINING AN OPTICAL LENS AND JOINT AND DEVICE FOR THE IMPLEMENTATION THEREOF
Attorney Docket Number::	0579-1055
Request for Early	No
Publication?::	
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: JEAN-MARC  
Middle Name::  
Family Name:: TRIDON  
Name Suffix::  
City of Residence:: DIJON  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing ~~107~~ RUE SAINTE CLAIRE DEVILLE 18  
Address::  
City of Mailing Address:: DIJON  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 21000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: PASCAL  
Middle Name::  
Family Name:: SOAVE  
Name Suffix::  
City of Residence:: LONGECOURT EN PLAINE  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 27, ROUTE DE GENLIS  
Address::  
City of Mailing Address:: LONGECOURT EN PLAINE

State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 21110



**Correspondence Information**

Correspondence Customer 000466  
Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/00846	3/17/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/03380	3/19/02	Yes

**Assignment Information**

Assignee Name::  
Street of Mailing  
Address::  
City of Mailing Address::  
State or Province of Mailing Address::  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::